Code, Section 552.021, 552.023, 559.003 and 559.004).

TEXAS DEPARTMENT OF HEALTH/BUREAU OF RADIATION CONTROL APPLICATION FOR A GENERAL LICENSE ACKNOWLEDGEMENT OF DEVICES CONTAINING RADIOACTIVE MATERIAL

Instructions - Complete all items of the application. Submit an original and an additional copy of the application for each use/storage location along with the appropriate fee to the Texas Department of Health, Bureau of Radiation Control, 1100 West 49th Street, Austin, Texas 78756-3189. Retain a copy for your files. Upon completion of processing, the general license will receive a General License Acknowledgement (GLA), issued in accordance with the provisions of Title 25 of the Texas Administrative Code, Chapter 289 and the Texas Radiation Control Act.

| PRIVACY NOTIFICATION: If you are applying | | | tht to request and be informed st. You also have the right to | |
|---|--|--|--|------------------------|
| Signature of Applicant or Representative | Date | Typed or Printed Name | | |
| I certify that the above information is true and devices. | l correct as verified by a p | hysical inventory and c | thecking of the information | n on the label of the |
| 8. CERTIFICATION | | | 1 | |
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| | | | | |
| Device Manufacturer | Device Model | Device Serial | Source Serial Number | Isotope / Activity |
| 7. DEVICE DATA: (list for each device pos | | • | Course Cariel North | Inotono / Activita |
| * Complete and attach BRC Form 252-1(Licensee/Registrant Bu- ** Check this box and provide the license number if you current | ly hold a radioactive material license | in Texas and want the acknowle | | of the license. |
| | • | Other | | |
| | | Additional Use/Storage Location | | |
| 9 Amendment of GLA No. G/L0 | | 9 RP Change | | |
| | | Name ChangeAddress ChangeDevice AdditionDevice Transfer | | |
| | | | | |
| 6. This application is for: | | f this is an amandment | request, check the approp | rioto hov holovy |
| (| | | • | |
| (Provide only if address in Item1 is not a physical location address) | | 5. Address (including ZIP Code) where radioactive material will be used and/or stored (If multiple sites, list each site): | | |
| 4. Records Location: | | 5 Address (including | ag ZID Coda) where redice | ctivo motorial will be |
| | | E-mail Address: | | |
| | | 3. Office Telephone No: FAX Telephone No: | | |
| | | 2 Office Television | N. | |
| (Texas address only): | | records): | | |
| 1. Legal Business Name and Business Mailin | ng Address of Applicant | 2. Responsible Person (RP) (person responsible for maintaining | | |

Listed below are detailed instructions for completing the application. Complete all applicable items. Because space on the form is limited, additional sheets should be used if necessary. When applying for a NEW General License Acknowledgement (GLA), in addition to this application form please complete and include BRC Form 252-1 [Texas Franchise Tax Status). Additionally, please remit the appropriate application fee with the application. The application fee can be determined by referring to Section (§) 289.204 of Title 25 of the Texas Administrative Code for the amount specified for "General License Acknowledgement - Gauge". This section may be accessed via the Internet at http://www.tdh.state.tx.us/ech/rad/pages/pagez.htm. If more than one site is specified for possession and use of a device and/or maintenance of records, an additional fee of 25% of the base fee is required for each additional site, up to a maximum of 50 sites. Review of the application will not begin until the fee has been received.

- <u>ITEM 1</u> Indicate the name and mailing address of the applicant in Texas. The applicant should be the corporation or other legal entity applying for the GLA. If the applicant is an individual, the individual should be acting in a private capacity and the use of the radioactive material should not be connected to the individual's employment with a corporation or other legal entity.
- <u>ITEM 2</u> The Responsible Person (RP) is the individual responsible for ensuring compliance with the regulatory requirements. The RP maintains the GLA and associated records, and is the primary contact with the Agency on matters pertaining to the GLA and use of the radioactive material. If vou have more than one Primary Storage/Use location, the same RP must be designated for all locations.
- <u>ITEM 3</u> Enter the telephone number of the RP, including the area code.
- ITEM 4 Provide only if the address in ITEM 1 is not a physical address (i.e., P O Box).
- <u>ITEM 5</u> a) Specify the location of use and/or storage by street address, city, and **ZIP Code**. If necessary, provide a descriptive address (for example, as five miles east of FM Road 14 on Highway 10) that will allow the Agency to easily locate the facility. A post office box alone is not acceptable. If you have more than one permanent storage and/or use location, indicate such on additional paper if required. b) If you possess a portable/mobile generally licensed (GL) device, indicate if it will be used at temporary sites throughout Texas.
- ITEM 6 Check New GLA if the applicant does not have a GLA issued by the Agency. Check Renewal and enter GLA number if the applicant is renewing a GLA which is about to expire. Check Amendment and enter the GLA number if the applicant is updating information previously submitted. When amending the GLA, check the appropriate box that specifies the type of amendment you are requesting (i.e., name change, RP change, etc.).
- <u>ITEM 7</u> DEVICE DATA: Only report devices that are authorized under Title 25 TAC §289.251. **The following information may be obtained by visual inspection of the permanently attached label located on the device. The application cannot be processed unless the device data is provided.**

Device Manufacturer - List the name of the manufacturer.

Device Model Number - List device model number.*

Device Serial Number - List the device serial number.*

Source Serial Number - List the serial number of the sealed source(s).

Radionuclide & Activity - List the radionuclide, such as cesium-137 (Cs-137) and include the activity for each sealed source. The activity should be expressed in curies (Ci), millicuries (mCi) or microcuries (μ Ci).

* - In a few instances a device manufacturer may provide a serial number only for either the device or the sealed source.

IF YOU CAN NOT LOCATE ALL THE DEVICE DATA, CONTACT THE DEVICE MANUFACTURER OR DISTRIBUTOR FOR ASSISTANCE.

<u>ITEM 8</u> - The application must be signed and dated by the applicant, or representative of the company. **The signature** certifies the above information is true and correct as verified by a physical inventory and checking of the information on the label of the devices.